

Food Establishment Inspection Report

Score: 97.5

Establishment Name: XCARET MEXICAN GRILL AND CANTINA

Establishment ID: 3034012507

Location Address: 202 W 4TH ST.

City: WINSTON SALEM State: North Carolina

Zip: 27101 County: 34 Forsyth

Permittee: XCARET MEXICAN GRILL AND CANTINA, INC.

Telephone: (336) 955-1345

☒ Inspection ☐ Re-Inspection

Wastewater System:

☒ Municipal/Community ☐ On-Site System

Water Supply:

☒ Municipal/Community ☐ On-Site Supply

Date: 09/27/2022 Status Code: A

Time In: 11:10 AM Time Out: 2:30 PM

Category#: IV

FDA Establishment Type: Full-Service Restaurant

No. of Risk Factor/Intervention Violations: 4

No. of Repeat Risk Factor/Intervention Violations: 2

Foodborne Illness Risk Factors and Public Health Interventions

Risk factors: Contributing factors that increase the chance of developing foodborne illness.

Public Health Interventions: Control measures to prevent foodborne illness or injury

Compliance Status		OUT	CDI	R	VR
Supervision .2652					
1	<input checked="" type="checkbox"/> OUT/N/A	PIC Present, demonstrates knowledge, & performs duties	1	0	
2	<input checked="" type="checkbox"/> OUT/N/A	Certified Food Protection Manager	1	0	
Employee Health .2652					
3	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Management, food & conditional employee; knowledge, responsibilities & reporting	2	X	X
4	<input checked="" type="checkbox"/> OUT	Proper use of reporting, restriction & exclusion	3	1.5	0
5	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Procedures for responding to vomiting & diarrheal events	1	0	X
Good Hygienic Practices .2652, .2653					
6	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Proper eating, tasting, drinking or tobacco use	1	0.5	X
7	<input checked="" type="checkbox"/> OUT	No discharge from eyes, nose, and mouth	1	0.5	0
Preventing Contamination by Hands .2652, .2653, .2655, .2656					
8	<input checked="" type="checkbox"/> OUT	Hands clean & properly washed	4	2	0
9	<input checked="" type="checkbox"/> OUT/N/A/N/O	No bare hand contact with RTE foods or pre-approved alternate procedure properly followed	4	2	0
10	<input checked="" type="checkbox"/> OUT/N/A	Handwashing sinks supplied & accessible	2	1	0
Approved Source .2653, .2655					
11	<input checked="" type="checkbox"/> OUT	Food obtained from approved source	2	1	0
12	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Food received at proper temperature	2	1	0
13	<input checked="" type="checkbox"/> OUT	Food in good condition, safe & unadulterated	2	1	0
14	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A/N/O	Required records available: shellstock tags, parasite destruction	2	1	0
Protection from Contamination .2653, .2654					
15	<input checked="" type="checkbox"/> OUT/N/A/N/O	Food separated & protected	3	1.5	0
16	<input checked="" type="checkbox"/> OUT	Food-contact surfaces: cleaned & sanitized	3	1.5	0
17	<input checked="" type="checkbox"/> OUT	Proper disposition of returned, previously served, reconditioned & unsafe food	2	1	0
Potentially Hazardous Food Time/Temperature .2653					
18	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A/N/O	Proper cooking time & temperatures	3	1.5	0
19	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A/N/O	Proper reheating procedures for hot holding	3	1.5	0
20	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A/N/O	Proper cooling time & temperatures	3	1.5	0
21	<input checked="" type="checkbox"/> OUT/N/A/N/O	Proper hot holding temperatures	3	1.5	0
22	<input checked="" type="checkbox"/> OUT/N/A/N/O	Proper cold holding temperatures	3	1.5	0
23	<input checked="" type="checkbox"/> OUT/N/A/N/O	Proper date marking & disposition	3	1.5	0
24	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A/N/O	Time as a Public Health Control; procedures & records	3	1.5	0
Consumer Advisory .2653					
25	<input checked="" type="checkbox"/> OUT/N/A	Consumer advisory provided for raw/undercooked foods	1	0.5	0
Highly Susceptible Populations .2653					
26	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Pasteurized foods used; prohibited foods not offered	3	1.5	0
Chemical .2653, .2657					
27	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Food additives: approved & properly used	1	0.5	0
28	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Toxic substances properly identified stored & used	2	1	X
Conformance with Approved Procedures .2653, .2654, .2658					
29	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Compliance with variance, specialized process, reduced oxygen packaging criteria or HACCP plan	2	1	0

Good Retail Practices

Good Retail Practices: Preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

Compliance Status		OUT	CDI	R	VR
Safe Food and Water .2653, .2655, .2658					
30	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Pasteurized eggs used where required	1	0.5	0
31	<input checked="" type="checkbox"/> OUT	Water and ice from approved source	2	1	0
32	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Variance obtained for specialized processing methods	2	1	0
Food Temperature Control .2653, .2654					
33	<input checked="" type="checkbox"/> OUT	Proper cooling methods used; adequate equipment for temperature control	1	0.5	0
34	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O	Plant food properly cooked for hot holding	1	0.5	0
35	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O	Approved thawing methods used	1	0.5	0
36	<input checked="" type="checkbox"/> OUT	Thermometers provided & accurate	1	0.5	0
Food Identification .2653					
37	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Food properly labeled: original container	2	1	X
Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657					
38	<input checked="" type="checkbox"/> OUT	Insects & rodents not present; no unauthorized animals	2	1	0
39	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Contamination prevented during food preparation, storage & display	2	1	X
40	<input checked="" type="checkbox"/> OUT	Personal cleanliness	1	0.5	0
41	<input checked="" type="checkbox"/> OUT	Wiping cloths: properly used & stored	1	0.5	0
42	<input checked="" type="checkbox"/> OUT/N/A	Washing fruits & vegetables	1	0.5	0
Proper Use of Utensils .2653, .2654					
43	<input checked="" type="checkbox"/> OUT	In-use utensils: properly stored	1	0.5	0
44	<input checked="" type="checkbox"/> OUT	Utensils, equipment & linens: properly stored, dried & handled	1	0.5	0
45	<input checked="" type="checkbox"/> OUT	Single-use & single-service articles: properly stored & used	1	0.5	0
46	<input checked="" type="checkbox"/> OUT	Gloves used properly	1	0.5	0
Utensils and Equipment .2653, .2654, .2663					
47	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used	1	0	X
48	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Warewashing facilities: installed, maintained & used; test strips	1	0	X
49	<input checked="" type="checkbox"/> OUT	Non-food contact surfaces clean	1	0.5	0
Physical Facilities .2654, .2655, .2656					
50	<input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Hot & cold water available; adequate pressure	1	0.5	0
51	<input checked="" type="checkbox"/> OUT	Plumbing installed; proper backflow devices	2	1	0
52	<input checked="" type="checkbox"/> OUT	Sewage & wastewater properly disposed	2	1	0
53	<input checked="" type="checkbox"/> OUT/N/A	Toilet facilities: properly constructed, supplied & cleaned	1	0.5	0
54	<input checked="" type="checkbox"/> OUT	Garbage & refuse properly disposed; facilities maintained	1	0.5	0
55	<input checked="" type="checkbox"/> OUT	Physical facilities installed, maintained & clean	1	0.5	0
56	<input checked="" type="checkbox"/> OUT	Meets ventilation & lighting requirements; designated areas used	1	0.5	0
TOTAL DEDUCTIONS:					2.5



Comment Addendum to Food Establishment Inspection Report

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 Telephone: (336) 955-1345

Establishment ID: 3034012507

☒ Inspection ☐ Re-Inspection Date: 09/27/2022
 Comment Addendum Attached? ☒ Status Code: A
 Water sample taken? ☐ Yes ☒ No Category #: IV

Email 1: jquiceno92@gmail.com

Email 2:

Email 3:

Temperature Observations

Effective January 1, 2019 Cold Holding is now 41 degrees or less

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
Rice	steam well	178						
Refried beans	steam well	150						
Chicken	steam well	165						
Beef	steam well	190						
Mozzarella	salad cooler	40						
Lettuce	salad cooler	39						
Sour cream	salad cooler	38						
Salsa	salad cooler	36						
Pico	salad cooler	36						
Diced tomato	salad cooler	37						
Pickled onions	salad cooler bottom	40						
Chicken	walk in cooler	40						
Black beans	walk in cooler	40						
Hot water	3 compartment sink	138						
Quat sanitizer	3 compartment sink (ppm)	150						

First
 Person in Charge (Print & Sign): German

Last
 Aguilar

Andres Gonzalez

First
 Regulatory Authority (Print & Sign): Elizabeth

Last
 Manning

Elizabeth Manning

REHS ID: 3136 - Manning, Elizabeth

Verification Required Date: 10/07/2022

REHS Contact Phone Number: (336) 703-3135

Authorize final report to
 be received via Email: _____



North Carolina Department of Health & Human Services

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 DHHS is an equal opportunity employer.
 Food Establishment Inspection Report, 10/2021

• Division of Public Health • Environmental Health Section • Food Protection Program



Comment Addendum to Inspection Report

Establishment Name: XCARET MEXICAN GRILL AND CANTINA

Establishment ID: 3034012507

Date: 09/27/2022 **Time In:** 11:10 AM **Time Out:** 2:30 PM

Certifications

Name	Certificate #	Type	Issue Date	Expiration Date
German Aguilar		Food Service		09/24/2024

Observations and Corrective Actions

Violations cited in this report must be corrected within the time frames below, or as stated in sections 8-405.11 of the food code.

- 3 2-201.11 (A), (B), (C), and (E) Responsibility of Permit Holder, Person in Charge and Conditional Employees (P)(REPEAT) - Establishment does not have updated employee reporting agreement that includes nontyphoidal Salmonella. The permit holder shall require food employees and conditional employees to report to the person in charge information about their health and activities as they relate to diseases that are transmissible through food. A food employee or conditional employee shall report the information in a manner that allows the person in charge to reduce the risk of foodborne disease transmission, including providing necessary additional information, such as the date of onset of symptoms and an illness, or of a diagnosis without symptoms, if the food employee or conditional employee. Updated employee health policy that includes nontyphoidal salmonella was emailed to the PIC by REHSI.
- 5 2-501.11 Clean-up of Vomiting and Diarrheal Event (Pf)(REPEAT) - Establishment does not have written procedures for vomiting and diarrheal events. A food establishment shall have written procedures for employees to follow when responding to vomiting or diarrheal events onto the surfaces in the food establishment. The procedures shall address the specific actions employees must take to minimize the spread of contamination and the exposure of employees, consumers, food, and surfaces to vomit or feces. CDI- REHSI emailed a copy to the PIC during inspection.
- 6 2-401.11 Eating, Drinking, or Using Tobacco (C) Employee food was stored besides food for service in the reach in cooler. An employee shall eat, drink, or use any form of tobacco only in designated areas where the contamination of exposed food; clean equipment, utensils, and linens; unwrapped single-service and single-use articles; or other items needing protection can not result. CDI: Education was given and employee food was moved below food for service.
- 28 7-201.11 Separation - Storage (P) A bottle of sanitizer was stored on a cutting board use to cut limes and lemons. Poisonous or toxic materials shall be stored so they can not contaminate food, equipment, utensils, linens, and single-service and single-use articles by: Separating the poisonous or toxic materials by spacing or partitioning. CDI: Education was given and sanitizer was moved to its designated area.
- 37 3-302.12 Food Storage Containers Identified with Common Name of Food (C) A containers holding salt and sugar were not labeled. Food that can be readily and unmistakably recognized such as dry pasta, working containers holding food or food ingredients that are removed from their original packages for use in the food establishment, such as cooking oils, flour, herbs, potato flakes, salt, spices, and sugar shall be identified with the common name of the food. CDI: Education was given and both items were labeled.
- 39 3-305.11 Store food in a clean, dry location, not exposed to contamination. Keep at least 6 inches above the floor. Two kegs were stored on the floor of the walk in cooler. Scoop handles were stored in the foods of the following items: rice, beans, shrimp, steak, and chicken containers. Food shall be protected from contamination by storing the food: (1) In a clean, dry location; (2) Where it is not exposed to splash, dust, or other contamination; and (3) At least 15 cm (6 inches) above the floor. CDI: Education was given and items were moved up and off the floor.
- 47 4-501.11 Good Repair and Proper Adjustment - Equipment (C)(REPEAT) with improvements - Re-caulk the hood where old caulking is separating and fixed broken ice shield. Equipment shall be maintained in a state of repair and condition that meets the requirements.
4-201.11 Equipment and Utensils - Durability and Strength (Pf) Four plates were chipped along the edges. Equipment and utensils shall be designed and constructed to be durable and to retain their characteristic qualities under normal use conditions. CDI: All plates were discarded during the inspection.
- 48 4-302.14 Sanitizing Solutions, Testing Devices (Pf) Chlorine test strips were not available during inspection for their dishmachine. A test kit or other device that accurately measures the concentration in MG/L of sanitizing solutions shall be provided.
VERIFICATION NEEDED BY 10/07/2022. YOU MAY CONTACT LIZ MANNING AT 336-462-1991 WHEN YOU HAVE OBTAINED YOUR TEST STRIPS.

Additional Comments